

EXP 10
DATE 3/16/11
HKS 10

Process for Purchasing Suppressor

1. Choose Suppressor (make, model, caliber etc.)
2. Find Class 3 dealer in State of residence
3. Pay in full for Suppressor (\$300-\$5000+)
 - a. Dealer orders Suppressor from Manufacturer (takes 4-8+weeks for delivery to dealer)
 - i. (manufacture to dealer, or dealer to dealer form 3 transfer paperwork, manufacture time, shipping time are factors of above delivery estimate. 4 weeks minimum)
 - b. Dealer has item in stock (Has serial #)
4. Dealer completes Form 4 in duplicate (page 1 of info packet, both sides) and Certification of Compliance (page 2 of info packet)
5. Purchaser signs Form 4's in duplicate and Certification of Compliance
6. Purchaser gets two (2) passport photos
7. Purchaser takes two (2) fingerprint cards to Local Identification Office, Purchaser fills out fingerprint card info and is fingerprinted by authorized person(s)
8. Purchaser Takes Form 4's in duplicate (page 1 of packet) to Local C.L.E.O. (Chief Law Enforcement Officer) of the county of Residence.
 - g. Many LEO agencies Only Sign form 4's after certain Residency requirements, Local Background Checks, Character references etc.
 - h. Most LEO agencies only sign Form 4's once a month
 - i. This process can add up to 60 days or be done the same day, depending on the agency
9. Purchaser Returns Completed Form 4 Packet to Dealer
10. Purchaser Writes Check to B.A.T.F.E. for \$200 for one-time Transfer Tax
11. Dealer Sends Paperwork to NFA Branch of ATF
12. WAIT! (75 -180 days) for paperwork to be processed 90-120 days average
13. Dealer receives Approved Form 4 with Tax Stamp Affixed (page 3 of info packet)
14. Purchaser Fills out Form 4473 (same form you fill out to purchase a firearm)
15. Purchaser receives Suppressor from dealer.
16. Purchaser is now Legal, REGISTERED, owner of one suppressor

THIS PROCESS IS REPEATED FOR EVERY SUPPRESSOR/SERIAL NUMBER (one serial # per NFA item) New buyers and Vets alike, complete this process for every NFA purchase.

U.S. Department of Justice
Bureau of Alcohol, Tobacco, Firearms and Explosives

Application for Tax Paid Transfer and Registration of Firearm

ATF Control Number

2a. Transferee's Name and Address (Including tradename, if any) (See instruction 2)

John Q. Taxpayer
100 Legal Citizen Lane
Quiettown, OO 99999

2b. County

QUIET

3a. Transferor's Name and Address (Including trade name, if any) (Executors: see instruction 2k)

Sleeping Giant 308
3434 Beck Street
Helena, MT 59601

3b. Transferor's Telephone Number and
Area Code

(406) 546-3659

3c. If Applicable: Decedent's Name, Address, and Date of Death

Submit in Duplicate to:

National Firearms Act Branch
Bureau of Alcohol, Tobacco, Firearms
and Explosives, P.O. Box 530298
Atlanta, GA 30353-0298

1. Type of Transfer (Check one)

☐ \$5 ☒ \$200

Submit with your application a check or money order for the appropriate amount made payable to the Bureau of Alcohol, Tobacco, Firearms and Explosives. Upon approval of this application, this office will acquire, affix and cancel the required "National Firearms Act" stamp for you.

(See instructions 2h, 2i and 3.)

3d. Number, Street, City, State and Zip Code of Residence (or Firearms Business Premises) if Different from Item 3a.

The above-named and undersigned transferor hereby makes application as required by Section 5812 of the National Firearms Act to transfer and register the firearm described below to the transferee.

4. Description of Firearm (Complete items a through h)

a. Name and Address of Manufacturer and/or Importer of Firearm

GUN MUFFLERS LLC
1111 Class II MFG Road
Quiettown, OO 99999

b. Type of Firearm (See instruction 1c)

Silencer

c. Caliber, Gauge or Size (Specify)

.22lr

d. Model

RIMFIRE MUFFLER

Length (Inches)

e. Of Barrel:

f. Overall:

6"

g. Serial Number

GM-0000001

h. Additional Description or Data Appearing on Firearm (Attach additional sheet if necessary)

5. Transferee's Federal Firearms License (If any)

(Give complete 15-digit number) (See instruction 2b)

First 6 digits	2 digits	2 digits	5 digits
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6. Transferee's Special (Occupational) Tax Status (If any)

a. Employer Identification Number

b. Class

7. Transferor's Federal Firearms License (If any)

(Give complete 15-digit number) (See instruction 2b)

First 6 digits	2 digits	2 digits	5 digits
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981049 01 2F 01126

8. Transferor's Special (Occupational) Tax Status (If any)

a. Employer Identification Number

b. Class

20-2850091

63

Under Penalties of Perjury, I Declare that I have examined this application, and to the best of my knowledge and belief it is true, correct and complete, and that the transfer of the described firearm to the transferee and receipt and possession of it by the transferee are not prohibited by the provisions of Chapter 44, Title 18, United States Code; Chapter 53, Title 26, United States Code; or Title VII of the Omnibus Crime Control and Safe Streets Act, as amended; or any provisions of State or local law.

9. Consent to Disclosure of Information to Transferee (See instruction 8). I Do ☒ Do Not (Circle one) Authorize ATF to Provide Information Relating to this Application to the Above-Named Transferee.

10. Signature of Transferor (or authorized official)

11. Name and Title of Authorized Official (Print or type)

Justin Marks / agent

12. Date

xx/xx/2011

The Space Below is for the use of the Bureau of Alcohol, Tobacco, Firearms and Explosives

By authority of the Director. This Application has been Examined, and the Transfer and Registration of the Firearm Described herein and the Interstate Movement of that Firearm, when Applicable, to the Transferee are:

Stamp Denomination

☐ Approved (with the following conditions, if any)

☐ Disapproved (For the following reasons)

Signature of Authorized ATF Official

Date

Transferee Information

The following questions must be answered by any transferee who is **not** a Federal firearms licensee or government agency. The transferee shall give full details on a separate sheet for all "YES" answers. (See instruction 2d)

	Yes	No		Yes	No
13. Are You:			14. Have You:		
a. Charged by information or under indictment in any court for a crime punishable by imprisonment for a term exceeding one year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Been convicted in any court of a crime for which the judge could have imprisoned you for more than one year, even if the judge actually gave you a shorter sentence?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. A fugitive from justice?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Been discharged from the armed forces under dishonorable conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. An alien who is illegally or unlawfully in the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Been adjudicated mentally defective or been committed to a mental institution?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Under 21 years of age?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Renounced your United States citizenship?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. An unlawful user of or addicted to, marijuana, or any depressant, stimulant, or narcotic drug, or any other controlled substance?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Been convicted in any court of a misdemeanor crime of domestic violence? This includes any misdemeanor conviction involving the use or attempted use of physical force committed by a current or former spouse, parent, or guardian of the victim, or by a person with a similar relationship with the victim.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Subject to a court order restraining you from harassing, stalking or threatening an intimate partner or child of such partner?	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

15. Transferee's Certification (See instruction 2e)

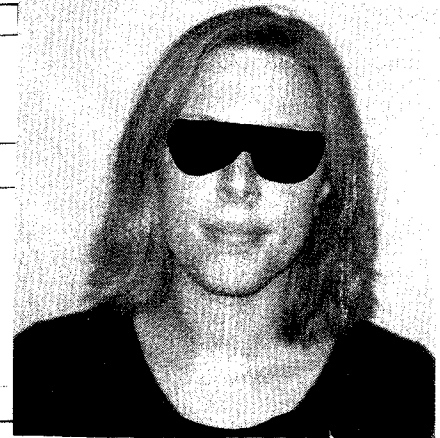
I, John Q. Taxpayer, have a reasonable necessity to
(Name of Transferee)
 possess the machinegun, short-barreled rifle, short-barreled shotgun, or destructive device described on this application for the following reason(s) collection, investment, recreation

and my possession of the device or weapon would be consistent with public safety (18 U.S.C. 922(b) (4) and 27 CFR 478.98).

UNDER PENALTIES OF PERJURY, I declare that I have examined this application and the documents submitted in support thereof, and to the best of my knowledge and belief it is true, correct and complete.

John Q. Taxpayer
(Signature of Transferee)

xx/xx/2011
(Date)



17. Law Enforcement Certification (See instruction 2e)

I certify that I am the chief law enforcement officer of the organization named below having jurisdiction in the area of residence of

John Q Taxpayer, I have no information indicating that the transferee will use the firearm or device
(Name of Transferee)
 described on this application for other than lawful purposes. I have no information that the receipt or possession of the firearm or device described in item 4 would be place the transferee in violation of State or local law.

Robert J. ... SHERIFF
(Signature and Title of Chief Law Enforcement Officer)

xx/xx/2011
(Date)

Quiettown Sheriff's Department 911 Law Enforcement Loop Quiettown, OO 99999
(Organization and Street Address)

QUIET 300-223-3006
(County) (Telephone Number)

Important Information for Currently Registered Firearms

If this registration document evidences the current registration of the firearm described on it, please note the following information.

Estate Procedures: For procedures regarding the transfer of firearms in an estate resulting from the death of the registrant identified in item 2a, the executor should contact the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405.

Change of Address: Unless currently licensed under the Gun Control Act, the registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, of any change to the address in Item 2a.

Change of Description: The registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, of any change to the description of the firearm in Item 4.

Interstate Movement: If the firearm identified in item 4 is a machinegun, short-barreled rifle, short-barreled shotgun, or destructive device, the registrant may be required by 18 U.S.C. § 922(a)(4) to obtain permission from ATF prior to any transportation in interstate or foreign commerce.

Restrictions on Possession: Any restriction (see approval block on face of form) on the possession of the firearm identified in item 4 continues with the further transfer of the firearm.

Persons Prohibited from Possessing Firearms: If the registrant becomes prohibited by 18 U.S.C. § 922 from possessing a firearm, the registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, immediately upon becoming prohibited for guidance on the disposal of the firearm.

Proof of Registration: This approved application is the registrant's proof of registration and it shall be made available to any ATF officer upon request.

Certification of Compliance with 18 U.S.C. 922(g)(5)(B)

Note: The Person Certifying to Citizenship must Complete this Form.

Certification

You MUST complete this certification or ATF will NOT be able to act upon your application and the application will be returned to you.

18 U.S.C. 922(g)(5)(B) generally makes it unlawful for any nonimmigrant alien to ship or transport in interstate or foreign commerce, or possess in or affecting commerce, any firearm or ammunition; or to receive any firearm or ammunition which has shipped or transported in interstate or foreign commerce.

A nonimmigrant alien is an alien in the United States in a nonimmigrant classification. The definition includes, in large part, persons traveling temporarily in the United States for business or pleasure, persons studying in the United States who maintain a residence abroad, and certain foreign workers. The definition does NOT include permanent resident aliens.

If applying for a Federal firearms license (FFL), ALL listed responsible persons must complete a CERTIFICATION.

1. Name under which the application was filed. (Last Name, First Name, Middle Initial - or - Name of Corporation, Partnership, or Association, if applicable)

Taxpayer, John Q.

2. Name of person certifying to citizenship. (Last Name, First Name, Middle Initial)

Taxpayer, John Q.

If you are a citizen of the United States, skip to question 7.

4. Immigration and Naturalization Service (INS) issued alien number or admission number.

3. What is your COUNTRY(ies) of citizenship? (List additional countries if applicable)

United States of America

5. Are you a NONIMMIGRANT alien? (Answer "YES," or "NO.")

NO

If you answered "No" to question 5, skip to question 7.

6. If you answered "Yes" to question 5, you must answer the following questions:

a. Are you in possession of a valid hunting license or permit lawfully issued in the United States? (Answer "YES" or "NO.") (If "YES," you must submit appropriate documentation in support of your "YES" answer.)

If you answered "Yes" to question 6a, complete the following items:

Hunting license/permit number, if any _____ State of issuance _____ Expiration date, if any _____

b. Are you an official representative of a foreign government who is accredited to the United States Government or your Government's mission to an international organization having its headquarters in the United States? (Answer "YES" or "NO.")

c. Are you an official of a foreign government or a distinguished foreign visitor who has been designated by the United States Department of State? (Answer "YES" or "NO.")

d. Have you received a waiver from the nonimmigrant alien prohibition from the Attorney General of the United States? (Answer "YES" or "NO.") (If "YES," you must submit appropriate documentation in support of your "YES" answer.)

7. Under penalties imposed by 18 U.S.C. 924, I certify that the statements contained in this Certification of Compliance with 18 U.S.C. 922 (g)(5)(B) form, and any attached statements in support thereof, are true and correct to the best of my knowledge and belief.

Signature of Individual Who is Identified in Question 2:

John Q. Taxpayer

Date: xx/xx/2011

FORM 4 APPROVED

OMB No. 1140-0014 (11/30/2010)

Application for Tax Paid Transfer and
Registration of Firearm

S316001

ATF Control Number

2a. Transferee's Name and Address (Including tradename, if any) (See instruction 2)

[REDACTED]

2b. County
Lewis & Clark

3a. Transferor's Name and Address (Including trade name, if any) (Executors: see instruction 2k)

Sleeping Giant 308
3434 Beck Street
Helena, MT 59601

3b. Transferor's Telephone Number and
Area Code
(406) 546-3659

Submit in Duplicate to:
National Firearms Act Branch
Bureau of Alcohol, Tobacco, Firearms
and Explosives, P.O. Box 530298
Atlanta, GA 30350-0298

1. Type of

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3d. Numbr
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Premises) if Different from Item 3a.

3c. If Applicable: Decedent's Name, Address, and Date of Death

The above-named and undersigned transferor hereby makes application as required by Section 5812 of the National Firearms Act to transfer and register the firearm described below to the transferee.

4. Description of Firearm (Complete items a through h)

a. Name and Address of Manufacturer and/or Importer of
Firearm

b. Type of Firearm (See
instruction 1c)

c. Caliber,
Gauge or
Size
(Specify)

d. Model

Length
(Inches)

e. Of Barrel:

f. Overall:

Silencer

223

g. Serial Number

12

h. Additional Description or Data Appearing on Firearm (Attach additional sheet if necessary)

5. Transferee's Federal Firearms License (If any)

(Give complete 15-digit number) (See instruction 2b)

First 6 digits

2 digits

2 digits

5 digits

6. Transferee's Special (Occupational) Tax Status (If any)

a. Employer Identification Number

b. Class

7. Transferor's Federal Firearms License (If any)

(Give complete 15-digit number) (See instruction 2b)

First 6 digits

2 digits

2 digits

5 digits

8. Transferor's Special (Occupational) Tax Status (If any)

a. Employer Identification Number

b. Class

981049

01

2F

01126

20-2850091

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Under Penalties of Perjury, I Declare that I have examined this application, and to the best of my knowledge and belief it is true, correct and complete, and that the transfer of the described firearm to the transferee and receipt and possession of it by the transferee are not prohibited by the provisions of Chapter 44, Title 18, United States Code; Chapter 53, Title 26, United States Code; or Title VII of the Omnibus Crime Control and Safe Streets Act, as amended; or any provisions of State or local law.

9. Consent to Disclosure of Information to Transferee (See instruction 8) (I Do or Do Not (Circle one) Authorize ATF to Provide Information Relating to this Application to the Above-Named Transferee.

10. Signature of Transferor (or authorized official)

11. Name and Title of Authorized Official
(Print or type)

12. Date

Justin Marks / agent

11/08/2010

The Space Below is for the use of the Bureau of Alcohol, Tobacco, Firearms and Explosives

By authority of the Director, This Application has been Examined, and the Transfer and Registration of the Firearm Described herein and the Interstate Movement of that Firearm, when Applicable, to the Transferee are:

Stamp Denomination

☒ Approved (with the following conditions, if any)

☐ Disapproved (For the following reasons)

Signature of Authorized ATF Official

William Shpema

Date

11/08/2010

APPLICANT

LEAVE BLANK

LAST NAME NAM

FIRST NAME

MIDDLE NAME

FILE

LEAVE BLANK

SIGNATURE OF PERSON FINGERPRINTED

John Q TAXPAYER

TAXPAYER JOHN

Q

RESIDENCE OF PERSON FINGERPRINTED

100 Lebac CITIZEN LN

ALIASES AKA

NONE

WWATF0800

ATF-NFA BRANCH

MARTINSBURG, WV

DATE OF BIRTH DOB

Month Day Year
01 01 01

DATE

SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

XX/XX Molly MC FINGERPRINT

EMPLOYER AND ADDRESS

*QUIETTOWN GROCERY
344 QUIET BLVD. QUIETTOWN, 00999*

CITIZENSHIP CTZ

U.S.A

YOUR NO OCA

SEX

RACE

HGT

WGT

EYES

HAIR

PLACE OF BIRTH POB

yes

P

600

400

BLK

WHT

LASTNITE, NW

LEAVE BLANK

REASON FINGERPRINTED

NFA

FB: NO FB

ARMED FORCES NO MNU

SOCIAL SECURITY NO. SOC

000-00-0002

MISCELLANEOUS NO. MNU

CLASS

REF



1. R THUMB



2. R INDEX



3. R MIDDLE



4. R RING



5. R LITTLE



6. L THUMB



7. L INDEX



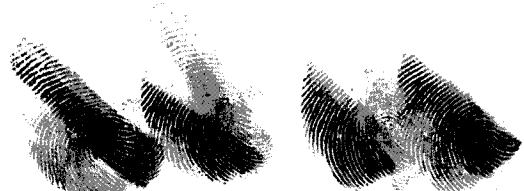
8. L MIDDLE



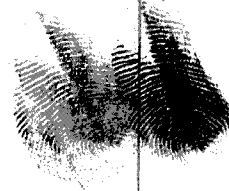
9. L RING



10. L LITTLE



LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY



L THUMB

R THUMB



RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY

NUMBER OF APPROVED FORM 4S FOR SILENCERS PER FISCAL YEAR BY STATE

NATIONAL SHOOTING
SPORTS FOUNDATION

State	Fiscal Year 2008 10/1/07 - 9/30/08	Fiscal Year 2009 10/1/08 - 9/30/09	Fiscal Year 2010 10/1/09 - 9/30/10
AK	112	149	152
AL	253	374	410
AR	396	491	507
AZ	1,003	1,090	981
CO	402	502	516
CT	256	323	270
FL	1,592	2,004	2,053
GA	832	1,175	1,153
ID	295	379	522
IL	-	-	2
IN	480	594	680
KS	15	238	283
KY	238	329	304
LA	160	236	353
MA	1	2	-
MD	384	376	450
ME	79	76	118
MI	1	3	7
MN	-	2	-
MO	7	404	444
MS	188	251	348
MT	162	189	228
NC	402	567	641
ND	47	62	78
NE	149	226	254
NH	137	144	182
NM	90	100	132
NV	382	512	517
OH	437	558	593
OK	569	820	691
OR	548	614	656
PA	574	770	870
SC	285	427	474
SD	139	172	246
TN	533	645	733
TX	1,927	2,946	3,621
UT	477	466	419
VA	684	787	957
WA	496	860	785
WI	166	223	310
WV	139	160	219
WY	52	107	106
TOTAL	15,089	20,353	22,265

This chart represents the Bureau of Alcohol, Tobacco, Firearms and Explosives statistical records that exist on the total number of National Firearms Act transfer stamps issued by state/ approved Form 4s for silencers per fiscal year by state. States omitted from this report may not allow the sale of silencers. Number of silencers processed per Form 4 not available.

*Fiscal year is defined as October 1-September 30.

Report provided by NSSF research. For additional NSSF research materials, please visit www.nssf.org/research.

WWW.NSSF.ORG



YES, SILENCERS ARE LEGAL*

Who can own a silencer? Anyone who is a legal U.S. resident, over 21 years of age, a non-felon, and lives in one of the 37 states that allow private ownership of silencers.*

Why would anyone want a silencer? A silenced firearm is eminently more enjoyable to shoot than one without a silencer. Silencers generally increase the accuracy of a host firearm while reducing recoil and eliminating up to 90% of the muzzle signature. Shooters are able to concentrate more on breath control and trigger pull when they are not subjected to the fatigue and distraction of a deafening, bright, muzzle report. Beginning shooters are typically not intimidated when introduced to the shooting sports with a silenced firearm, and are able to easily hear instructions given to them by trainers since every AAC model from .22LR to .50BMG reduces the report of a host firearm to below the OSHA guideline level for hearing damage. Silenced firearms are also less likely to disturb any people, livestock, or wildlife that may be in close proximity to where you shoot.

It's as easy as: LOCATE a dealer in your state through the AAC dealer page. Your dealer will fill out and MAIL the appropriate forms to the BATF. WAIT PATIENTLY, then pick up your new can and start enjoying the countless benefits of quieter shooting. The one-time paperwork lasts forever.**

Learn everything you need to know from the
Silencer University™, visit www.AACcanU.com.



*Contrary to popular belief, silencers are and always have been legal to own under federal law. At this time, the following states allow private ownership of silencers: AL, AR, AK, AZ, CO, CT, FL, GA, ID, IL, IN, KS, KY, LA, ME, MD, MI, MN, NE, NY, NH, NM, NC, OH, OK, OR, PA, SC, SD, TN, TX, UT, VA, WA, WI, WV, and WY. Of the fifteen states that do not allow civilian ownership, CA, IA, KS, MA, MO, MS, and MI allow Class 3 dealers and Class 2 manufacturers to possess silencers.

**Not to exceed federal, state, and local laws.